

# **PART B - FEE(S) TRANSMITTAL**

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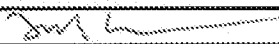
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31625 7590 07/23/2010

**BAKER BOTTS L.L.P.**  
**PATENT DEPARTMENT**  
**98 SAN JACINTO BLVD., SUITE 1500**  
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## **Certificate of Mailing or Transmission**

This communication is being filed with the U.S. Patent and Trademark Office through the Electronic Filing System (EFS) on the below date:

<b>Todd Rosson</b>	(Depositor's name)
	(Signature)
<b>October 5, 2010</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/597,513	07/10/2008	Luca Matteucci	071308.0735	2185

**TITLE OF INVENTION: FLUID INJECTOR AND METHOD FOR MANUFACTURING A FLUID INJECTOR**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	10/25/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
GANEY, STEVEN J	3752	239-040000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 King & Spalding L.L.P.

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**CONTINENTAL AUTOMOTIVE GMBH HANNOVER, GERMANY**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4871 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims **SMALL ENTITY** status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming **SMALL ENTITY** status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Typed or printed name Andreas H. Grubert

Date October 5, 2010

Registration No. 59,143

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